



Absentee List Address Confirmation

As required by state law, completed form must be submitted to election office or you may respond electronically if you wish to remain on the absentee list.

Election Calendar

- May 3, 2016 School
- June 7, 2016 Primary
- November 8, 2016 General
- May 2, 2017 School
- November 7, 2017 Municipal

NOTICE TO VOTER ON ABSENTEE LIST: You are **REQUIRED** to return this form or submit the required information through our website in order to automatically be mailed absentee ballots for upcoming elections. If electronically submitted, a signature is not required. All red boxes are required to be completed before submission to the Election Department.

☐ Check if the following address is the correct MAILING address for ballots to be mailed to you for elections held between **February 1, 2016 and January 31, 2018**, then sign below and return this form by mail, email or in person, or submit information electronically.

VOTER ID

NAME

ADDRESS

Even if your address is correct you MUST complete and submit this form OR email the information to the election office to have absentee ballots automatically mailed to you for upcoming elections.

☐ Check If the above mailing address is **NOT** correct, or if it is correct for only part of the year (clarify specific time period for each address if you will have more than one mailing address during the year). Please clearly print the complete correct mailing address(es) below, along with any additional instructions if necessary, then sign below and return this form by mail, email or in person, or submit information electronically. *Please update my mailing address as follows:*

Street or PO Box

City, State and Zip

Country

Dates for temporary address change:

From date: ____/____/____

To date: ____/____/____

If you have moved and have not updated your *physical residential address* for voter registration purposes with the election office, please update that address in the space provided below.

*Please update my **physical residential address** for voter registration purposes as follows (in same county only):*

Street

City, State and Zip

By signing below, I affirm that I have confirmed my mailing and/or residential address for ballots to be mailed to me for elections for which I am qualified from February 1, 2016 through January 31, 2018.

Signature

Driver's License # OR Last 4 SSN

____/____/____
Date of Birth

Date Signed

Phone # in case the office needs to contact you _____

You are **REQUIRED** to return this form or submit the required information in order to automatically be mailed absentee ballots for upcoming elections.

Return this form via mail, in person, or email, or by submitting your name, date of birth, Montana driver's license or ID number (or last four digits of your Social Security number) and your current mailing address to the county election office. Timely response will ensure that a ballot is mailed to you for upcoming elections for which you are eligible.

Flathead County Election Department

Mailing and physical address: 800 S Main St. Room 115 Kalispell MT 59901

Website address: <http://flathead.mt.gov/election>

Email address: electionweb@flathead.mt.gov